

JAN 1 3 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Anatole Klyosov : Group Art Unit: 1623

Serial No.: 10/649,130 : Examiner: McIntosh III, Traviss C.

Filed: August 27, 2003

For: DELIVERY OF A THERAPEUTIC AGENT IN A FORMULATION FOR

REDUCED TOXICITY

## **REGULAR MAIL CERTIFICATE**

Date of Deposit: January 10, 2006

I hereby certify that the following attached paper(s) and/or fee

(1) Revocation of Power of Attorney With New Power Of Attorney And Change Of Correspondence Address;

(2) Statement Under 37 CFR 3.73(b);

(3) A self-addressed stamped postcard, return of which is requested to acknowledge receipt of the enclosed documents.

by depositing same in a postage prepaid envelope in an official depository under the exclusive care and custody of the United States Postal Service under 37 C.F.R. Section 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Respectfully submitted, GREENBERG TRAURIG

Dated: January 10, 2006

CORRESPONDENCE:

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## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

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Application Number	10/649,130			
Filing Date	08-27-2003			
First Named Inventor	Anatole Klyosov			
Art Unit	1623			
Examiner Name	MCINTOSH III, TRAVISS C			
Attorney Docket Number				

I hereby revoke all previous powers of attorney given in the above-identified application.					
A Power of Attorney is submitted herewith.					
OR  I hereby appoint the practitioners associated with the Customer Number:  32,361					361
Please change the correspondence address for the above-identified application to:  The address associated with					
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Telephone		Email			
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature	SIGT				
Name David Platt		<del></del>		<del></del>	
Date 1/	5/2066	Telepho			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
*Total of 2	forms are submitted.				

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)				
Applicant/Patent Owner: <u>PRO-PHARMACEUTICALS, INC.</u>				
Application No./Patent No./Control No.: 10/649,130	Filed/Issue Date: <u>08-27-2003</u>			
Entitled: DELIVERY OF A THERAPEUTIC AGENT IN A FORM	MULATION FOR REDUCED TOXICITY			
(Name of Assignee)	, a Nevada Corporation			
1.  the assignee of the entire right, title, and interest; c				
<ol><li>an assignee of less than the entire right, title and ir (The extent (by percentage) of its ownership intere</li></ol>	nterest est is%)			
in the patent application/patent identified above by virtue	e of either:			
in the United States Patent and Trademark Office a original assignment is attached.	application/patent identified above. The assignment was recorded at Reel <u>012011</u> , Frame <u>0323</u> , or a true copy of the			
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Additional documents in the chain of title are li	isted on a supplemental sheet.			
assignee was, or concurrently is being, submitted for	iginal assignment document(s)) must be submitted to Assignment record the assignment in the records of the USPTO. <u>See</u> MPEP			
The undersigned (whose title is supplied below is authority	orized to act on behalf of the assignee.			
Signature	Date			
David Platt	617 559-0033			
Printed or Typed Name	Telephone Number			
Chief Execute Officer Title				

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